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PTO/SB/05 (05-03)

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<h1>UTILITY PATENT APPLICATION TRANSMITTAL</h1> <p><i>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</i></p>		Attorney Docket No. 7277-000005		PTO U.S. 677/141 2264																								
		First Inventor Herman Victorov																										
		Title SERVO CONTROL FOR CAPSULE MAKING MACHINE																										
		Express Mail Label No. EL 623 312 498 US																										
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																										
<p>1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 54] <i>(preferred arrangement set forth below)</i></p> <div style="border: 1px solid black; padding: 2px; width: fit-content;"><input type="checkbox"/> Specification filed in English</div> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 16]</p> <p>5. Oath or Declaration [Total Pages]</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i></p> <p style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="margin-left: 20px;">b. Specification Sequence Listing on:</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> paper</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p>																										
ACCOMPANYING APPLICATIONS PARTS																												
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: <u>acknowledgement postcard</u></p>																												
<p>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)</div><div>of prior application No: ____ / ____</div></div> <p>Prior application information: Examiner _____ Group / Art Unit: _____</p> <p>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>																												
17. CORRESPONDENCE ADDRESS																												
<div style="display: flex; align-items: center;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label 27572<div style="margin-left: 10px;">or <input type="checkbox"/> Correspondence address below</div></div> <p style="text-align: center; font-size: small;">(Insert Customer No. or Attach bar code label here)</p>																												
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;">Name</td><td colspan="4">Harness, Dickey & Pierce, P.L.C.</td></tr><tr><td rowspan="2">Address</td><td colspan="4">P.O. Box 828</td></tr><tr><td colspan="4"> </td></tr><tr><td>City</td><td>Bloomfield Hills</td><td>State</td><td>MI</td><td>Zip Code 48303</td></tr><tr><td>Country</td><td>United States of America</td><td>Telephone</td><td>248-641-1600</td><td>Fax 248-641-0270</td></tr></table>					Name	Harness, Dickey & Pierce, P.L.C.				Address	P.O. Box 828								City	Bloomfield Hills	State	MI	Zip Code 48303	Country	United States of America	Telephone	248-641-1600	Fax 248-641-0270
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<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 20%;">Name (Print/Type)</td><td style="width: 30%;">Monte L. Falcoff/Jeffrey H. Urian</td><td style="width: 30%;">Registration No. (Attorney/Agent)</td><td style="width: 20%;">37,617/46,232</td></tr><tr><td>Signature</td><td colspan="2" style="text-align: center; vertical-align: bottom;"></td><td>Date October 1, 2003</td></tr></table>					Name (Print/Type)	Monte L. Falcoff/Jeffrey H. Urian	Registration No. (Attorney/Agent)	37,617/46,232	Signature			Date October 1, 2003																
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